PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

indicated unless corrected be maintenance fee notification		in Block I, by (a)	specifying a	a new correspondence address		and demostic mailings of the	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of Fee(s) Transmittal. To papers. Each addition have its own certificate	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
7590 04/06/2006  HAROLD R. BROWN-III  BURNS, DOANE, SWECKER & MATHIS, L.L.P.  P.O. Box 1404				C	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
Alexandria, VA 22313-1404						(Depositor's name)	
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						(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE F		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/720,184	11/25/2003	Laurence Bu		Burlacot	033818-025	4214	
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	07/06/2006	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
FISCHER, JUSTIN R		1733		152-555000	<del>-</del>		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			(1) the na or agents ( (2) the na registered 2 registered	2. For printing on the patent front page, list  1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is isted, no name will be printed.			
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN		elow, no assignee of this form is NOT	data will app F a substitute (B) RESIDE	pear on the patent. If an assign for filing an assignment.  ENCE: (CITY and STATE OR GRANGES-PACCOT)	COUNTRY) SWITZERLAND		
Please check the appropriate	e assignee category or catego	ories (will not be pr	inted on the p	patent): Individual (12)	Corporation or other private g	roup entity Government	
4a. The following fee(s) are enclosed:  1 Jesue Fee  2 Publication Fee (No small entity discount permitted)  Advance Order - # of Copies  5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-4800 (enclose an extra copy of this form).				
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ALAN E. KOPECKI

Authorized Signature

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